



York® Central Environmental
Systems

YORK INTERNATIONAL

YORK REPLACEMENT FURNACE REBATE PROGRAM

"CLAIM FORM"

✓ DEALER NAME: _____

✓ ADDRESS: _____

CONSUMER NAME: _____

ADDRESS: _____

✓ SOCIAL SECURITY #: _____
cc

FEDERAL TAX ID #

UTILITY ACCOUNT NUMBER: _____

✓ FURNACE(S) SOLD:

<u>MODEL #</u>	<u>SERIAL #</u>	<u>MBTU OUTPUT</u>	<u>REBATE</u> <u>\$1 PER MBTU</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

INVOICE #: _____

TOTAL: _____

SALES AGREEMENT DATE: _____

INSTALLATION DATE: _____

NOTE: UPON RECEIPT OF THIS FORM OR DATE OF INSTALLATION,
WHICHEVER IS LATER, WE WILL CREDIT THE DEALER ACCOUNT FOR THE
AMOUNT OF THE TOTAL REBATE.

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